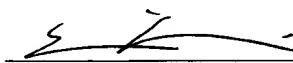


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| FORM PTO-1390 (REV 10-2000) | | U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE | | ATTORNEYS DOCKET NUMBER: 0670-255 |
| TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371 | | | U.S. APPLICATION NO. (If known, see 37 CFR 1.5) 09/763958 | |
| INTERNATIONAL APPLICATION NO. PCT/JP99/04614 | INTERNATIONAL FILING DATE: August 26, 1999 | | PRIORITY DATE CLAIMED: August 31, 1998 | |
| TITLE OF INVENTION CARRIER REPRODUCING CIRCUIT | | | | |
| APPLICANT(S) FOR DO/EO/US Atsushi SHINODA, Kenichi SHIRAISHI | | | | |
| <p>Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:</p> <ol style="list-style-type: none"> 1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371. 2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371. 3. <input checked="" type="checkbox"/> This is an express request to promptly begin national examination procedures (35 U.S.C. 371(f)). 4. <input checked="" type="checkbox"/> The US has been elected by the expiration of 19 months from the priority date (PCT Article 31). 5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2)). <ol style="list-style-type: none"> a. <input type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). b. <input checked="" type="checkbox"/> has been communicated by the International Bureau. c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US). 6. <input checked="" type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)). 7. <input checked="" type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)). <ol style="list-style-type: none"> a. <input checked="" type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> have been communicated by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. d. <input type="checkbox"/> have not been made and will not be made. 8. <input checked="" type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)). 9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)). 10. <input type="checkbox"/> An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)). | | | | |
| <p>Items 11 to 16 below concern document(s) or information included:</p> <ol style="list-style-type: none"> 11. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98. 12. <input checked="" type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included. 13. <input checked="" type="checkbox"/> A FIRST preliminary amendment. <ol style="list-style-type: none"> <input type="checkbox"/> A SECOND or SUBSEQUENT preliminary amendment. 14. <input type="checkbox"/> A substitute specification. 15. <input type="checkbox"/> A change of power of attorney and/or address letter. 16. <input checked="" type="checkbox"/> Other items or information: International Search Report Six (6) Sheets of Formal Drawings | | | | |

| U.S. APPLICATION NO. (If known, see 37 C.F.R. 1.50) 09/763958 | | INTERNATIONAL APPLICATION NO. PCT/JP99/04614 | ATTORNEYS DOCKET NUMBER: 0670-255 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--------------|---|-----------------------------------|----------------------------------|------|--------------|--------------|-----------|---|-----------|----|--------------------|---------|---|-----------|----|---|--|--|------------|----------|--------------------------------------|--|--|--|------------|--|--|--|--|----|-------------------|--|--|--|-------------|--|--|--|--|----|-----------------------------|--|--|--|-------------|--|--|--|--|---------|------------------------------|--|--|--|------------|--|--|--|--|----------------------------------|--|--|--|--|--------------------|--|
| <p>17. <input checked="" type="checkbox"/> The following fees are submitted:</p> <p>BASIC NATIONAL FEE (37 CFR 1.492(a)(1) – (5)):</p> <p>Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445(a)(2)) paid to USPTO and International Search Report not prepared by the EPO or JPO #1000.00</p> <p>International preliminary examination fee (37 CFR 1.482) not paid to USPTO but International Search Report prepared by the EPO or JPO \$860.00</p> <p>International preliminary examination fee (37 CFR 1.482) not paid to USPTO but international search fee (37 CFR 1.445(a)(3)) paid to USPTO \$710.00</p> <p>International preliminary examination fee paid to USPTO (37 CFR 1.482) but all claims did not satisfy provisions of PCT Article 33(1)-(4) \$690.00</p> <p>International preliminary examination fee paid to USPTO (37 CFR 1.482) and all claims satisfied provisions of PCT Article 33(1)-(4) \$100.00</p> | | <table border="1"> <tr> <td colspan="2">CALCULATIONS</td> </tr> <tr> <td colspan="2">PTO USE ONLY</td> </tr> </table> | | CALCULATIONS | | PTO USE ONLY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CALCULATIONS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PTO USE ONLY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>ENTER APPROPRIATE BASIC FEE AMOUNT =</p> <p>Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e)).</p> | | \$860.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <th>CLAIMS</th> <th>NUMBER FILED</th> <th>NUMBER EXTRA</th> <th>RATE</th> <th></th> </tr> <tr> <td>Total claims</td> <td>13 - 20 =</td> <td>0</td> <td>X \$18.00</td> <td>\$</td> </tr> <tr> <td>Independent claims</td> <td>2 - 3 =</td> <td>0</td> <td>X \$80.00</td> <td>\$</td> </tr> <tr> <td colspan="3">MULTIPLE DEPENDENT CLAIM(S) (if applicable)</td> <td>+ \$270.00</td> <td>\$270.00</td> </tr> <tr> <td colspan="4">TOTAL OF ABOVE CALCULATIONS =</td> <td>\$1,130.00</td> </tr> <tr> <td colspan="4"><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by ½.</td> <td>\$</td> </tr> <tr> <td colspan="4">SUBTOTAL =</td> <td>\$ 1,130.00</td> </tr> <tr> <td colspan="4">Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).</td> <td>\$</td> </tr> <tr> <td colspan="4">TOTAL NATIONAL FEE =</td> <td>\$ 1,130.00</td> </tr> <tr> <td colspan="4">Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property</td> <td>\$40.00</td> </tr> <tr> <td colspan="4">TOTAL FEES ENCLOSED =</td> <td>\$1,170.00</td> </tr> <tr> <td colspan="4"></td> <td>Amount to be refunded: \$</td> </tr> <tr> <td colspan="4"></td> <td>Charged: \$</td> </tr> </table> | | CLAIMS | NUMBER FILED | NUMBER EXTRA | RATE | | Total claims | 13 - 20 = | 0 | X \$18.00 | \$ | Independent claims | 2 - 3 = | 0 | X \$80.00 | \$ | MULTIPLE DEPENDENT CLAIM(S) (if applicable) | | | + \$270.00 | \$270.00 | TOTAL OF ABOVE CALCULATIONS = | | | | \$1,130.00 | <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by ½. | | | | \$ | SUBTOTAL = | | | | \$ 1,130.00 | Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)). | | | | \$ | TOTAL NATIONAL FEE = | | | | \$ 1,130.00 | Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property | | | | \$40.00 | TOTAL FEES ENCLOSED = | | | | \$1,170.00 | | | | | Amount to be refunded: \$ | | | | | Charged: \$ | |
| CLAIMS | NUMBER FILED | NUMBER EXTRA | RATE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total claims | 13 - 20 = | 0 | X \$18.00 | \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent claims | 2 - 3 = | 0 | X \$80.00 | \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MULTIPLE DEPENDENT CLAIM(S) (if applicable) | | | + \$270.00 | \$270.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL OF ABOVE CALCULATIONS = | | | | \$1,130.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by ½. | | | | \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| TOTAL NATIONAL FEE = | | | | \$ 1,130.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| TOTAL FEES ENCLOSED = | | | | \$1,170.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | Amount to be refunded: \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | Charged: \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>a. <input checked="" type="checkbox"/> A check in the amount of <u>\$1,170.00</u> to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>19-2380</u>. A duplicate copy of this sheet is enclosed.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.</p> <p>SEND ALL CORRESPONDENCE TO: NIXON PEABODY LLP 8180 GREENSBORO DRIVE, SUITE 800 MCLEAN, VIRGINIA 22102</p> <p></p> <p>SIGNATURE:</p> <p><u>Eric J. Robinson</u></p> <p>NAME:</p> <p><u>38,285</u></p> <p>REGISTRATION NUMBER:</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |